Expenditures per Consumer for Community Outpatient Services

Operational Definition: Average annual community outpatient expenditures per consumer for a Fiscal Year.

Operational Measures: The number of dollars spent on community outpatient mental health services divided by the total number of community outpatient clients in a Fiscal Year.

Formula:

Number of dollars spent on community	outpatient mental	health	services	in the	Fiscal
	Year				

Number of community outpatient mental health service recipients in the Fiscal Year

Discussion: Cost indicators can be used to understand trends in resource allocation, to demonstrate relative levels of effort and resource availability, and to assess the financial viability of agencies within the public mental health system. They can be combined with other indicators to understand trends in system-level change across time. Cost data are broad estimates of the costs of services provided. Outpatient service costs include therapeutic and residential services and both tertiary and acute services. Revenue and Expenditure reports do not break out funds by age or ethnic groups, therefore these break outs are not reported. The average annual outpatient expenditure per consumer has increased slightly. However, there remains significant variability across RSNs.

Data Notes:

- Dollar amounts are taken from RSN reported Revenue and Expenditure Reports. For FY03 and FY04, expenditures include all direct service costs (except inpatient treatment and crisis and commitment services), all direct service support costs, and all administrative costs. FY05 expenditures include all direct service costs (except freestanding evaluation and treatment, mental health residential treatment, and all categories under inpatient treatment), all direct service support costs and all administrative costs.
- All Community Outpatient penetration rates (i.e. count of people receiving service) include clients who
 receive any outpatient services whether it was reported as an hour or a day of service.
- Counts are of people, not admissions, episodes, or units of services.
- RSN counts show the number of unduplicated clients within each RSN (i.e. a person is counted once in <u>each</u> RSN where they receive services).
- The State total is unduplicated across all RSNs (i.e. each person is only counted once in the Statewide total even though they can be counted in more than one RSN).

RSN	<u>FY03</u>			<u>FY04</u>		<u>FY05</u>			
	Average Annual OP Total Cost of OP Cost per			Average Annual OP # OP Total Cost of OP Cost per			Average Annual OP Cost per		
	# OP Served	Services	Person	Served	Services	Person	Served	Services	Perso
Northeast	2,008	\$5,651,014	\$2,814	1,639	\$5,500,997	\$3,356	1,372	\$4,471,953	\$3,25
Grays Harbor	2,362	\$5,564,378	\$2,356	2,341	\$4,515,076	\$1,929	2,368	\$5,072,202	\$2,14
Timberlands	4,318	\$5,880,358	\$1,362	4,110	\$5,536,451	\$1,347	3,233	\$5,832,140	\$1,80
Southwest	4,648	\$6,001,011	\$1,291	4,414	\$5,014,656	\$1,136	4,126	\$5,675,482	\$1,37
Chelan / Douglas	2,799	\$7,487,233	\$2,675	2,525	\$5,315,957	\$2,105	2,343	\$4,477,693	\$1,91
North Central	2,732	\$9,775,873	\$3,578	3,038	\$8,329,851	\$2,742	3,152	\$8,423,120	\$2,67
Thurston / Mason	4,767	\$11,420,083	\$2,396	5,209	\$13,727,981	\$2,635	5,274	\$11,867,031	\$2,25
Clark	6,843	\$20,645,777	\$3,017	6,719	\$15,174,255	\$2,258	7,338	\$16,739,527	\$2,28
Peninsula	6,921	\$17,139,234	\$2,476	7,422	\$15,617,902	\$2,104	7,646	\$15,145,469	\$1,98
Spokane	10,199	\$27,998,452	\$2,745	10,008	\$32,944,012	\$3,292	9,552	\$23,381,529	\$2,44
Greater Columbia	16,989	\$40,985,976	\$2,413	19,048	\$38,197,150	\$2,005	18,102	\$37,177,783	\$2,05
Pierce	14,930	\$47,061,097	\$3,152	15,453	\$37,178,774	\$2,406	14,025	\$30,080,523	\$2,14
North Sound	19,248	\$42,205,095	\$2,193	18,403	\$34,025,569	\$1,849	17,493	\$34,726,124	\$1,98
King	31,881	\$90,227,323	\$2,830	33,404	\$79,561,409	\$2,382	32,349	\$68,577,488	\$2,12
Statewide	128,032	\$338,042,904	\$2,640	131,154	\$300,640,042	\$2,292	125,718	\$271,649,024	\$ 2, ²

